

## **CITY OF NEWPORT BEACH**

## COMMUNITY DEVELOPMENT DEPARTMENT BUILDING DIVISION

100 Civic Center Drive | P.O. Box 1768 | Newport Beach, CA 92658-8915 www.newportbeachca.gov | (949) 644-3200

## **REQUESTFOR REFUND**

Send <u>permit request</u> to your building inspector and <u>plan check</u> requests to the Permit Center.

(\*Refunds can only be reimbursed to company or individual who made original payment.)

	( neganias can omy se remisarses			are erriginer	<i>puy</i>
Project Address:		Permit or Plan Check #:			
Address:					
Type of	☐ Permit ☐ Plan Check ☐ Other		Amour	nt Paid:	Date Fee Paid:
Fee:			<del></del> \$		/ /
PETITIONER INFORMATION					
Name (*Mus	t be payor of fees):	Company Name:			
Street Address:		City:		State:	Zip Code:
Street Address.		City.		State.	Zip Couc.
Email:		Phone:			
* ATTACH PROOF OF PAYMENT TO THIS FORM (copy of check, credit card statement, or cash receipt )					
State					
Reason for					
Requesting	Refund:				
a Kefund:					
I HEREBY CERTIFY THAT THE ABOVE STATEMENT IS TRUE.					
Petitioner's Signature:		Title:			Date:
-					/ /
FOR STAFF USE ONLY					
Department					
	☐ Approve Refund	☐ Deny Refund			
Comments:					
Inspector	Name:	Signature:			Date:
Approval:					/ /
СВО	Name:	Signature:			Date:
Approval:					/ /

Note: Refunds are subject to a 20% administrative charge / issuance fees are not refundable.